

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Wong et al.

Title: PRODUCT SELLING AND PRICING SYSTEM AND METHOD

Appl. No.: 10/001,580

Filing Date: 11/1/2001

Examiner: Elisca, Pierre Eddy

Art Unit: 3621

Conf. No.: 2720

AMENDMENT TRANSMITTAL

Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Additional Rate		Claims Fee	
	Total Claims:	26	-	29	=	0	x	\$52.00	=	\$0.00
Independent Claims:	3	-	6	=	0	x	\$220.00	=		\$0.00
First presentation of any Multiple Dependent Claims: + \$390.00 = \$0.00										
CLAIMS FEE TOTAL = \$0.00										

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[X] Extension for response filed within the first month:	\$130.00	\$130.00	
[] Extension for response filed within the second month:	\$490.00	\$0.00	
[] Extension for response filed within the third month:	\$1,110.00	\$0.00	
[] Extension for response filed within the fourth month:	\$1,730.00	\$0.00	
[] Extension for response filed within the fifth month:	\$2,350.00	\$0.00	
	EXTENSION FEE TOTAL:	\$130.00	
[] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$140.00	\$0.00	
	CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:	\$130.00	
[] Small Entity Fees Apply (subtract ½ of above):		\$0.00	
	Extension Fees Previously Paid:	\$0.00	
		TOTAL FEE:	\$130.00

The above-identified fees of \$130.00 are being paid by credit card via EFS-Web.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment instructions in EFS-Web being incorrect or absent, resulting in a rejected or incorrect credit card transaction, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date /May 12, 2009/ _____

By /Steven C. Becker/ _____

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